

EXHIBIT 6



CSAA Fire & Casualty Insurance Company
P.O. Box 24523
Oakland, CA 94623-1523



MARYLYN STROME
4626 S OXFORD AVE
TULSA, OK 74135-6829



YOUR CLAIM INFORMATION

| | |
|------------------|-----------------|
| Claim number | 1002-95-7061 |
| Policy Number | HO33478748 |
| Policyholder | MARYLYN STROME |
| Date of incident | August 01, 2017 |

Questions
about your
claim?

Erica Dandridge
856-209-7142
Or 888-335-2722, Ext. 2097142
Regular Claims Center hours are
Monday – Friday 8:00 AM – 6:00 PM,
Eastern Time

October 31, 2018

Dear Marylyn Strome:

Thank you for choosing AAA and trusting us with your insurance needs.

We are writing to you to confirm that a claim has been opened on your policy.

At AAA, we strive to make your claims experience as easy and smooth as possible. We'll work with you throughout the process, provide fast, caring service and resolve your claim fairly.

Please review all of the enclosed documents and take note of any additional information we need from you.

We value you as our customer and appreciate the opportunity to assist you.

Sincerely,

Erica Dandridge

Erica Dandridge
Claims Representative

WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.

▶ **Please turn the page** and on the back you'll find the sections listing "What you need to do" and "What's inside."

For questions about your policy, please refer to the policy booklet previously provided to you. You can request a copy of your policy booklet from your claims representative.



► What you need to do

- Complete and sign the Sworn Statement in Proof of Loss (enclosed)

► What's inside

| | |
|--------------------------------------|-----------------------------|
| About your deductible | Your policy coverage |
| Loss of use coverage | Getting repairs |
| How to submit documents | Other important information |
| More about your loss of use coverage | |



CSAA Fire & Casualty Insurance Company
P.O. Box 24523
Oakland, CA 94623-1523

About your deductible

| | |
|-------------------------------|--------------------|
| Refrigerated Property | \$100 Deductible |
| WATER BACK UP & SUMP OVERFLOW | \$1,000 Deductible |
| Wind/Hail | \$2,829 Deductible |
| Section I | \$1,000 Deductible |

Each deductible above is applied once per incident. Depending on the outcome of the investigation, more than one deductible may apply.

Your policy coverage

Your policy provides the following coverages. Some of these coverages apply to your incident. For more information about your coverage, please contact us at the phone number listed under Your Claim Information box on page one.

| | |
|--|---------------------------|
| A-Dwelling | \$282,908 per occurrence |
| B-Other Structures | \$28,291 per occurrence |
| C-Personal Property | \$198,036 per occurrence |
| D-Loss of Use | \$84,872 per occurrence |
| E-Personal Liability | \$300,000 per occurrence |
| F-Medical Payments to Others | \$1,000 per person |
| Fungi, Wet or Dry Rot or Bacteria | \$5,000 per policy period |
| Loss Assessment | \$1,000 per occurrence |
| Water Backup and Sump Pump Discharge or Overflow | \$5,000 per occurrence |

Loss of use coverage

Your policy provides coverage for loss of use. Loss of use is when you have to leave your property because it is not fit to live in as a result of a covered incident, or if a mandatory evacuation is required. There are three types of benefits under loss of use:

1. Additional living expenses – reasonable costs above and beyond your normal cost of living.
2. Fair rental value – the market value of all or part of your property that you normally rent or lease.
3. Mandatory evacuation – up to two weeks of additional living expenses or fair rental value when your property is not damaged but is threatened by a covered incident.

For further information on loss of use coverage, please see the last page in this letter.

Getting repairs

You have the right to select the contractor of your choice to repair covered damage to your property. At your request, we will refer you to our Network Repair Program. Depending on your location and type of repair needed, a contractor may be available to assist you.

All contractors that are part of the Network Repair Program are properly licensed, bonded, and insured. The program monitors the quality and timeliness of repairs, in addition to providing a workmanship warranty. If you would like a referral to our Network Repair Program, you can contact us at the phone number listed on page one of this letter.

How to submit documents

Please send all correspondence documents and completed forms as described below, including your claim number on each document to expedite the processing of your claim.

- **Email:** claimdocs@csaa.com
Include claim number 1002-95-7061 in the subject line **in the exact format** to ensure proper delivery.
- **Fax:** 877.548.1610
Provide a cover sheet and include claim number 1002-95-7061
- **Mail:** CSAA Fire & Casualty Insurance Company
P.O. Box 24523, Oakland, CA 94623-1523
Include claim number 1002-95-7061.

AAA only keeps digital copies of submitted documentation relating to your claim. Please do not send us original documents, as we cannot keep or return them.

Other important information

Protecting your property from further damage

If your loss requires emergency services or temporary repairs, you have the responsibility to take steps to protect the property from further damage. Please remember to keep an accurate record of all repair expenses. Also, please do not get rid of anything related to the repairs without checking with us. If you do not protect your property from further damage, you may not be able to submit a claim for the damage to your dwelling, other structures or personal property insured by AAA.

Mortgage on your property

If there is an outstanding mortgage on your property, we may be required to include the mortgage company on some payments.



CSAA Fire & Casualty Insurance Company
P.O. Box 24523
Oakland, CA 94623-1523

Actions against AAA

No action can be brought against us unless there has been full compliance with the policy provisions and the action is filed in a court within two years after the date of incident.

Sworn statement of proof of loss

Please complete the enclosed Sworn Statement of Proof of Loss and return it to us within 60 days. For delivery options, please refer to the **"How to submit documents"** section.

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CSAA Fire & Casualty Insurance Company
P.O. Box 24523
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More about your loss of use coverage

Here are the loss of use benefits available to you under your policy.

Additional living expenses

Your policy provides coverage for the reasonable additional living expenses you incur because of the portion of your property that is not fit to live in due to a covered loss. Here are some examples of items that could increase your reasonable living expenses temporarily:

- Restaurant meals made necessary by damage to your kitchen, or if you are staying at a hotel or motel that does not have cooking facilities.
- The cost of alternate accommodations, such as a hotel, motel or rental unit, including any necessary moving and storage expenses, if your property is not fit to live in.
- Increased household costs for furniture rental, laundry, etc.
- Kenneling for pets if your alternate accommodations do not allow animals on the premises.

Fair rental value

Your policy provides for compensation of the fair rental value for that part of your insured property rented to others or held for rental by you, if a covered incident causes that part of your property to be not fit to live in. The coverage provides for the fair rental value of that damaged portion of the insured property not fit to live in for the shortest time needed to repair or replace the damage up to the loss of use coverage limit.

Any payment made under this benefit will be less any expenses that do not continue while that part of your property is not fit to live in.

Mandatory evacuation

When you are required to leave your property because it is threatened by a covered incident which might ultimately damage your property, we are able to provide you with up to two weeks of the loss of use benefits included in your policy.

If your property is found to be damaged by the incident, a primary loss of use benefit may trigger providing a benefit for a longer period of time.

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CSAA Fire & Casualty Insurance Company
P.O. Box 24523
Oakland, CA 94623-1523

Sworn Statement In Proof of Loss

To: CSAA Fire & Casualty Insurance Company

Named Insured on Policy:
MARYLYN STROME

Claim Number:
1002-95-7061

Date of Loss:
08/01/2017

The terms of your policy require that you provide us the following information, under oath, in support of your claim.

1. Your Name:

Insured Address:

Mailing Address (if Different):

Home Phone Number
() -

Work Phone Number
() - ext

Is this policy issued in your
name? ☐ Yes ☐ No

If not, state your relationship
to the Named insured:

2. Generally describe the loss:

Date: Time: ☐ AM. ☐ PM. Location:

Cause of Loss:

Description of Loss:

3. Are you the sole owner of the damaged or stolen property?

☐ Yes ☐ No

If no, please list the name, address, and phone number of the owner or co-owner of the property, including any lien holders or mortgagees.

4. Is there other insurance issued to you or anyone else that might cover this loss?

☐ Yes ☐ No

If yes, please list the name, address, named insured, and policy number of each such policy.

5. Has there been a change in occupancy of or title to the property during the term of this policy?

☐ Yes ☐ No

If yes, please describe the changes.

6. Since the policy was issued, have there been any changes or additions to the damaged or stolen property?

☐ Yes ☐ No

If yes, please describe the changes.

7. Please describe in detail the extent of damage to your property. You will also be required to complete an inventory of damaged or stolen personal property if any, as required under the policy in Section I – Conditions, Duties After Loss.

8. Have you incurred additional expenses due to this loss? ☐ Yes ☐ No

If yes, please attach all receipts for all additional expenses incurred.

9. Is any of the damaged, lost or stolen property used in any way for business or income-producing purposes? ☐ Yes ☐ No

If yes, please explain in detail the circumstances surrounding such use.

10. Is this claim made under the Credit Card, Electronic Fund Transfer Card or Access Device, Forgery and Counterfeit Money coverage? ☐ Yes ☐ No

If yes, provide all supporting documentation for such claim.

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I declare under penalty of perjury, under the laws of the State of Oklahoma, that the foregoing is true and correct to the best of my knowledge.

Date: _____ Signature: _____



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Oakland, CA 94623-1523



MARILYN STROME
4626 S OXFORD AVE
TULSA, OK 74135-6829



YOUR CLAIM INFORMATION

| | |
|------------------|----------------|
| Claim number | 1002-95-7061 |
| Policy Number | HO33478748 |
| Policyholder | MARYLYN STROME |
| Date of incident | April 04, 2017 |

*Questions
about your
claim?*

Nathan Fulks
918-284-8722

Regular Claims Center hours are
Monday – Friday 8:00 AM – 7:00 PM,
Central Time

November 08, 2018

Dear Marilyn Strome:

This letter confirms our discussion on 11/7/2018.

Your offer of payment is \$694.47. This amount is enclosed. This is based on the cost of repairing the damage to covered property, known as replacement cost value (RCV), less any applicable deductible.

Please review all of the documents and take note of any additional information we may need from you. You can contact us at the phone number listed under Your Claim Information box to discuss your offer of payment.

We value you as our customer and appreciate the opportunity to assist you.

Sincerely,

Nathan Fulks

Nathan Fulks
Claims Representative

► What you need to do

- ☐ Review estimate(s) (enclosed)

► **Please turn the page** and on the back, you'll find the section listing "What's inside."

Please turn over



► What's inside

| | |
|--|--|
| About your offer of payment | Providing estimate if using a contractor |
| If additional damage discovered after estimate completed | How to submit documents |
| Estimate(s) | |

About your offer of payment

There are item(s) to understand about your offer of payment:

- A copy of the estimate(s) is enclosed for your review.



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P.O. Box 24523
Oakland, CA 94623-1523

Your offer of payment

This offer represents what AAA accepts as the undisputed amount owed to you. Depositing the check or receiving an electronic funds transfer for the offer of payment amount means you accept the offer of payment for your claim, but does not constitute a release of the entire claim. Accepting this payment from AAA does not prevent you from pursuing any additional amount you believe you are entitled to. We have issued the payment to minimize any financial inconvenience to you.

There is a \$1,000.00 difference between the replacement cost for this incident outlined on the attached estimate related to your dwelling and/or other structure and the offer of payment. This could be due to your deductible or, if applicable depreciation you will not be able to get back. If you chose to complete all of the work outlined in the attached estimate, you will need to arrange with your contractor payment for the difference between the offer of payment and the total cost of the estimate.

Providing estimate if using a contractor

The enclosed estimate related to your dwelling and/or other structure outlines the repairs that are approved for this claim. If you are using a contractor to complete repairs, please provide them with a copy of this estimate. If your contractor has questions regarding this estimate, have them contact us at the phone number listed under Your Claim Information box.

If additional damage discovered after estimate completed

If additional damage is discovered after the enclosed estimate related to your dwelling and/or other structure was completed, please contact us at the phone number listed under Your Claim Information box before repairs start.

How to submit documents

Please send all documents as described below, including your claim number on each document to expedite the processing of your claim.

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Include claim number 1002-95-7061 in the subject line in the exact format to ensure delivery.
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Provide a cover sheet and include claim number 1002-95-7061.
- **Mail:** CSAA Fire & Casualty Insurance Company
P.O. Box 24523, Oakland, CA 94623-1523
Include claim number 1002-95-7061.

AAA only keeps digital copies of submitted documents, therefore, please do not send us original documents, as we cannot keep or return them.



CSAA Fire & Casualty Insurance Company
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Oakland, CA 94623-1523



MARILYN STROME
4626 S OXFORD AVE
TULSA, OK 74135-6829



YOUR CLAIM INFORMATION

| | |
|------------------|----------------|
| Claim number | 1002-95-7061 |
| Policy Number | HO33478748 |
| Policyholder | MARYLYN STROME |
| Date of incident | April 04, 2017 |

Questions
about your
claim?

Erica Dandridge
856-209-7142

Regular Claims Center hours are
Monday – Friday 8:00 AM – 6:00 PM,
Eastern Time

November 16, 2018

Dear Marilyn Strome:

Thank you for choosing AAA and trusting us with your insurance needs. We have completed our review of your claim, and, based on the facts of the review, concluded that your policy provides coverage for a portion of your claim. You will receive a separate communication with more information and the offer of payment for the portion of your claim that is covered.

What you need to know

Results of our claim review

Based on the inspection completed by Field Adjuster Nathan Fulks it was determined hail caused damage to the soft metals on the roof. No storm related damages were found on the roof shingles. Coverage would not apply for any damages on the roof related to wear and tear per the following policy language. Coverage will apply for the items listed on the enclosed estimate.

For your reference, below is the specific section(s) of your policy that pertains to this claim.

HO3 Special Form HO 00 03 10 00

Section I-Perils Insured Against

A. Coverage A - Dwelling And Coverage B -Other Structures

1. We insure against risk of direct physical loss to property described in Coverages A and B.

2. We do not insure, however, for loss:

a. Excluded under Section I - Exclusions;

b. Involving collapse, except as provided in

E.8. Collapse under Section I - Property Coverages; or

c. Caused by:

...

(6) Any of the following:

(a) Wear and tear, marring, deterioration;

(b) Mechanical breakdown, latent defect, inherent vice, or any quality in property that causes it to damage or destroy itself;

Section I-Exclusions

B. We do not insure for loss to property described in Coverages A and B caused by any of the following. However, any ensuing loss to property described in Coverages A and B not precluded by any other provision in this policy is covered.

1. Weather conditions. However, this exclusion only applies if weather conditions contribute in any way with a cause or event excluded in A. above to produce the loss.

2. Acts or decisions, including the failure to act or decide, of any person, group, organization or governmental body.

3. Faulty, inadequate or defective:

a. Planning, zoning, development, surveying, siting;

b. Design, specifications, workmanship, repair, construction, renovation, remodeling, grading, compaction;

c. Materials used in repair, construction, renovation or remodeling; or

d. Maintenance;

of part or all of any property whether on or off the "residence premises".

What you need to do

Protecting your property from further damage

Although your policy does not cover this claim, you have a responsibility to take steps to protect the property from additional or subsequent damage. If you have questions about protecting your property, please contact us at 856.209.7142.

Other important information

Additional facts about your claim

We reserve the right to provide any additional facts or legal support for our decision. If you have additional information you believe is relevant to your claim, please contact us at 856.209.7142.

Actions against AAA

Please note your insurance policy provides under SECTION I – CONDITIONS, Suit Against Us, that no action shall be brought against us unless there has been compliance with the policy provisions and the action is filed in a court of competent jurisdiction within two years of the date of loss.

How to contact us

If you have any questions, please contact us at 856.209.7142.

We value you as our customer and appreciate the opportunity to assist you.

Sincerely,



Erica Dandridge
Claims Representative



CSAA Fire & Casualty Insurance Company
P.O. Box 24523
Oakland, CA 94623-1523



MARILYN STROME
4626 S OXFORD AVE
TULSA, OK 74135-6829



YOUR CLAIM INFORMATION

| | |
|------------------|----------------|
| Claim number | 1002-95-7061 |
| Policy Number | HO33478748 |
| Policyholder | MARYLYN STROME |
| Date of incident | April 04, 2017 |

*Questions
about your
claim?*

Nathan Fulks
918-284-8722

Regular Claims Center hours are
Monday – Friday 8:00 AM – 7:00 PM,
Central Time

November 08, 2018

Dear Marilyn Strome:

This letter confirms our discussion on 11/7/2018.

Your offer of payment is \$694.47. This amount is enclosed. This is based on the cost of repairing the damage to covered property, known as replacement cost value (RCV), less any applicable deductible.

Please review all of the documents and take note of any additional information we may need from you. You can contact us at the phone number listed under Your Claim Information box to discuss your offer of payment.

We value you as our customer and appreciate the opportunity to assist you.

Sincerely,

Nathan Fulks

Nathan Fulks
Claims Representative

► What you need to do

- ☐ Review estimate(s) (enclosed)

► **Please turn the page** and on the back, you'll find the section listing "What's inside."



► What's inside

| | |
|--|--|
| About your offer of payment | Providing estimate if using a contractor |
| If additional damage discovered after estimate completed | How to submit documents |
| Estimate(s) | |

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There are item(s) to understand about your offer of payment:

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Include claim number 1002-95-7061 in the subject line in the exact format to ensure delivery.
- **Fax:** 877.548.1610
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P.O. Box 24523
Oakland, CA 94623-1523
Phone 888.335.2722
Fax 877.548.1610

January 02, 2019



MARILYN STROME
4626 S OXFORD AVE
TULSA, OK 74135-6829

Re: Insured: MARYLYN STROME
Claim No.: 1002-95-7061
Date of Loss: April 04, 2017

Dear Marilyn Strome:

Based on the reinspection completed by Field Adjuster Nathan Fulks and Hancock Claims it was determined no additional or storm related damage was found to the roof. Please be advised the enclosed denial and estimate still apply at this time. I have also enclosed the report from Hancock Claims for your records. Please contact me if you have any further questions.

Sincerely,

Erica Dandridge

Erica Dandridge
Claims Representative
Phone: 856-209-7142



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Erica Dandridge
Claims Representative



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Nathan Fulks
Claims Representative

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► What's inside

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P.O. Box 24523
Oakland, CA 94623-1523
Phone 888.335.2722
Fax 877.548.1610

February 11, 2019



MARYLYN STROME
4626 S OXFORD AVE
TULSA, OK 74135-6829

Re: Insured: MARYLYN STROME
Claim No.: 1002-95-7061
Date of Loss: April 04, 2017

Dear MARYLYN STROME:

We recently reviewed our records and found that a check that we wrote to you (check # 717089904 in the amount of \$694.47 issued on November 07, 2018) has not been cashed. We are eager to provide a fast and fair resolution to this claim, so we're asking for your assistance.

Perhaps you simply forgot to cash the check. If so, please cash it now – the check will automatically void 180 days after issue. However, if you never received the check, have misplaced the check, or have decided not to cash the check for any other reason, we'd like to know. Please contact me at the number below to resolve this issue.

Please know that I'm available to help you achieve the full value of your policy with us. If you have any questions or concerns regarding the resolution of your claim, please don't hesitate to call.

Sincerely,

Erica Dandridge

Erica Dandridge
Claims Representative
Phone: 856-209-7142



CSAA Fire & Casualty Insurance Company
P.O. Box 24523
Oakland, CA 94623-1523



MARILYN STROME
4626 S OXFORD AVE
TULSA, OK 74135-6829



YOUR CLAIM INFORMATION

| | |
|------------------|----------------|
| Claim number | 1002-95-7061 |
| Policy Number | HO33478748 |
| Policyholder | MARYLYN STROME |
| Date of incident | April 04, 2017 |

**Questions
about your
claim?**

Nathan Fulks
918-284-8722

Regular Claims Center hours are
Monday – Friday 8:00 AM – 7:00 PM,
Central Time

November 08, 2018

Dear Marilyn Strome:

This letter confirms our discussion on 11/7/2018.

Your offer of payment is \$694.47. This amount is enclosed. This is based on the cost of repairing the damage to covered property, known as replacement cost value (RCV), less any applicable deductible.

Please review all of the documents and take note of any additional information we may need from you. You can contact us at the phone number listed under Your Claim Information box to discuss your offer of payment.

We value you as our customer and appreciate the opportunity to assist you.

Sincerely,

Nathan Fulks

Nathan Fulks
Claims Representative

► What you need to do

- ☐ Review estimate(s) (enclosed)

► **Please turn the page** and on the back, you'll find the section listing "What's inside."

Please turn over



► What's inside

| | |
|--|--|
| About your offer of payment | Providing estimate if using a contractor |
| If additional damage discovered after estimate completed | How to submit documents |
| Estimate(s) | |

About your offer of payment

There are item(s) to understand about your offer of payment:

- A copy of the estimate(s) is enclosed for your review.



CSAA Fire & Casualty Insurance Company
P.O. Box 24523
Oakland, CA 94623-1523

Your offer of payment

This offer represents what AAA accepts as the undisputed amount owed to you. Depositing the check or receiving an electronic funds transfer for the offer of payment amount means you accept the offer of payment for your claim, but does not constitute a release of the entire claim. Accepting this payment from AAA does not prevent you from pursuing any additional amount you believe you are entitled to. We have issued the payment to minimize any financial inconvenience to you.

There is a \$1,000.00 difference between the replacement cost for this incident outlined on the attached estimate related to your dwelling and/or other structure and the offer of payment. This could be due to your deductible or, if applicable depreciation you will not be able to get back. If you chose to complete all of the work outlined in the attached estimate, you will need to arrange with your contractor payment for the difference between the offer of payment and the total cost of the estimate.

Providing estimate if using a contractor

The enclosed estimate related to your dwelling and/or other structure outlines the repairs that are approved for this claim. If you are using a contractor to complete repairs, please provide them with a copy of this estimate. If your contractor has questions regarding this estimate, have them contact us at the phone number listed under Your Claim Information box.

If additional damage discovered after estimate completed

If additional damage is discovered after the enclosed estimate related to your dwelling and/or other structure was completed, please contact us at the phone number listed under Your Claim Information box before repairs start.

How to submit documents

Please send all documents as described below, including your claim number on each document to expedite the processing of your claim.

- **Email:** claimdocs@csaa.com
Include claim number 1002-95-7061 in the subject line in the exact format to ensure delivery.
- **Fax:** 877.548.1610
Provide a cover sheet and include claim number 1002-95-7061.
- **Mail:** CSAA Fire & Casualty Insurance Company
P.O. Box 24523, Oakland, CA 94623-1523
Include claim number 1002-95-7061.

AAA only keeps digital copies of submitted documents, therefore, please do not send us original documents, as we cannot keep or return them.